APPLIED BEHAVIOR ANALYSIS (ABA) THERAPY SERVICES

Effective Date: 07/01/2015

Updated: 07/01/2015

All ABA Services require prior authorization from the Department. Review the prior authorization criteria for these services on the Prior Authorization website:

http://dss.sd.gov/medicaid/providers/pa/

CODE	PROCEDURE	FEE
0359T	Behavior identification assessment	\$300.00
0368T	Behavior treatment with protocol modification first 30 minutes	\$59.98
0369T	Behavior treatment with protocol modification each additional 30 minutes	\$59.98
0370T	Family behavior treatment guidance	\$119.96
0371T	Multiple-family group behavior treatment guidance	\$39.99
0372T	Behavior treatment social skills group	\$39.99

NOTE: Fee schedules are subject to review and amendment under the provisions of § 67:16:01:28. A provider may request that the department review a particular reimbursement rate for possible adjustment or request the inclusion or exclusion of a particular code from the list. When reviewing the requests, the department shall review paid claims information, Medicare fee schedules, national coding lists, and documentation submitted by the provider or the associated medical professional organization to determine whether a change is warranted.